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The purpose of an assessment home is to provide an accurate psychosocial assessment of the child and family and a temporary (30 - 60 days) safe and nurturing environment for the child. An assessment home is a highly skilled foster family. The assessment home also provides appropriate services within the shortest amount of time to help families identify and remedy those issues which contributed to the child's out-of-home placement. For children remaining in out-of-home care, the assessment home will develop individualized care plans to facilitate an appropriate and successful placement. In addition, efforts to mobilize community resources will be initiated during the child's stay at the assessment home. The assessment, care plans, and services may be provided directly by the assessment home, subcontracted and/or arranged/provided by the family Children's Service Worker.

An early assessment of the child's needs, then matching those needs with the skill and competency level of the placement provider will significantly reduce the number of replacements experienced by the child.

Referral Criteria

Initial placement in an assessment home may not be appropriate or needed by all children entering out-of-home care. The following is recommended criteria for determining when assessment homes should be used. However, the final decision should be based on the circumstances and needs of the individual child and family.

- Little information is available on the family and child's medical, developmental, emotional, social history;
- Existing records are either out of date, inadequate, or indicate special needs which cannot be met in an assessment/receiving home;
- Child's development is significantly delayed and he is unable to make his needs known;
- Serious or chronic abuse/neglect of child;
- Alleged parental inability to care for the child due to suspected mental illness, i.e., bipolar manic depressive, paranoid schizophrenia, delusions, suicidal ideation or actions;
- Alleged cult involvement;
- Parent is hostile and threatening, with history of aggressive behaviors, at the time of placement;
- Disrupted adoption placement:

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• Voluntary relinquishment of children over three (3) and the parent is uncooperative in supplying needed information; and

• Children displaying symptoms indicative of an unattached child.

Assessment homes should not be considered under the following circumstances:

- Healthy infant born in a hospital and abandoned by a parent;
- Healthy infant born in a hospital and parent is hospitalized and unable to care for baby;
- Child picked up on Capias Order, with immediate plans for return to another state's jurisdiction;
- Planned placement by parent with significant knowledge about and cooperation regarding child's needs; and
- Child's medical condition requires special training or knowledge, i.e., medical foster parent.

Assessment Home Responsibilities

Intake

- Orient child, parent and Children's Service Worker to the physical plant, daily routine, rules, etc.
- Complete necessary intake documents which should at a minimum include the following information:
 - Child's name;
 - Date of birth/race/gender;
 - Reason for out-of-home placement;
 - Physical health status current/pending needs;
 - Name and location of physician;
 - Allergies, if any;
 - Behavior problems;

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School status; and

- Name and location of school.
- Make immediate plans for next meeting with the family and the child.

School

- Provide transportation to school of current enrollment on a daily basis until other transportation can be arranged;
- Inform school of child's temporary change of address;
- Attend necessary conferences (in conjunction with parent whenever possible) and advocate for child's appropriate placement and school interventions; and
- Develop and maintain a daily log regarding school related issues, i.e., grades, behavior, etc. and make same available to Family Support Team.

Behavior

- Develop and maintain log regarding observed behavior, i.e., reactions to stressors, emerging behavior patterns and effectiveness of specific interventions; and
- Develop and implement individualized care plan and document effectiveness and appropriateness of plan.

Therapeutic Services

Therapeutic services may be provided by assessment home personnel or through a contractual arrangement authorized by the Children's Division (CD). Therapeutic services may include, but are not necessarily limited to, the following:

- Therapeutic assessment of child within 24 hours of placement;
- Therapeutic assessment of family in the family home within 72 hours of child's placement;
- Ongoing counseling as indicated by assessment;
- Evaluation and diagnosis as indicated by assessment, including alcohol and substance abuse;

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Family and group therapy as indicated by assessment;

- Parent education;
- Sexual abuse screenings and necessary referrals for long-term treatment; and
- Referrals for inpatient and/or outpatient substance abuse treatment.

Reports

- Provide the family Children's Service Worker with child and family assessments within 30 days of child's placement. The assessments shall include description of child's individual needs, i.e., social, health, education, placement, etc.; treatment goals; frequency of planned in-home and in-office therapy sessions; time lines; and dates for review.
- Provide the family Children's Service Worker with a written court report ten (10) days prior to any scheduled court date. The court report should detail progress, remaining goals, treatment needs and recommendations for child's placement.

Other Responsibilities

- Testify in court proceedings if/when requested to do so; and
- Provide space and supervision for family visitation on a twice weekly basis.

Family Children's Service Worker Responsibilities

General

- Provide case management services;
- Provide all information relevant to the child to the assessment home prior to placement;
- Keep assessment home apprised of all new information regarding the family and child;
- Schedule and facilitate Family Support Team meetings, permanency planning reviews, and staffings, advising all members of the time and location;

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 Provide authorization of payment for services to child and family when such services are not provided by assessment home personnel and included in the contracted reimbursement rate;

- Make recommendations to the court regarding placement, reunification or other permanency plans; and
- Facilitate child's placement in most appropriate, least restrictive environment.

School

- Within 24 working hours, contact child's current school of enrollment.
 Request attendance records and information regarding child's special needs and IEP, if child is receiving special services;
- Request educational evaluation, if indicated;
- Authorize school personnel to request and share information with the placement provider; and
- If child must change schools, obtain necessary documents, i.e., birth certificate, immunization record, and withdrawal slip.

Medical

- Arrange medical treatment for obvious/suspected injuries prior to placement;
- Obtain ongoing medications, i.e., asthma, seizures, etc. from the parents or the child's physician immediately or no later than 24 hours after placement;
- Document any existing medical condition and required treatment and provide same to assessment/receiving home personnel; and
- Obtain detailed medical health history, including an immunization record, within 24 hours of placement.

MEMORANDA HISTORY: